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OCT 182013

Federal Communications Commission Office of the Secretary

October 18, 2013

## HAND DELIVERY

Federal Communications Commission Ms. Marlene Dortch, Secretary 445 12<sup>th</sup> Street, SW Room TW-A325 Washington, DC 20554

RE:

FCC Forms 481 filed on behalf of Cintex Wireless

For the following SACs: 109012, 189016, 409028, 589003, 209018; WC

Docket No. 10-90

Dear Ms. Dortch:

Enclosed herein please find an original and two (2) copies of Cintex Wireless' FCC Form 481 for the SACs referenced above.

In the event that you have any questions, please call 301-363-4306.

Please contact me if you have any questions.

Sincerely,

Robert Felgar General Counsel

**Cintex Wireless** 

No of Conjunctive 0+2

A STATE OF THE STATE OF	rm 481 - Carrier Annual Reporting ollection Form	FCC Form OMB Con July 2013	1481 trol No: 3060-0986/OMB Control No: 3060-0819
<010>	Study Area Code	109012	
<015>	Study Area Name	Cintex Wireless Inc	ACCEPTEDIE
<020>	Program Year	2014	LED
<030>	Contact Name: Person USAC should contact with questions about this data	Robert Felgar	ACCEPTED/FILED  OCT 182013
<035>	Contact Telephone Number: Number of the person identified in data line <0302	3013634306	Federal Communications Commission Office of the Secretary
<039>	Contact Email Address: Email of the person identified in data line <030>	rfelgar@prepaidwirelessgroup.com	
ANNUA	L REPORTING FOR ALL CARRIERS		54.313 54.422 Completion Completion Required Required
<100>	Service Quality Improvement Reporting	(complete attached worksheet)	(check box when complete)
<200> <210>	Outage Reporting (voice)	(complete attached worksheet) no outages to report	
<300> <310> <320> <330>	Unfulfilled Service Requests (voice)  Detail on Attempts (voice)  Unfulfilled Service Requests (broadband)  Detail on Attempts (broadband)	(attach descriptive document) (ottach descriptive document)	
<400> <410> <420> <430> <440> <450>	Number of Complaints per 1,000 customers (voice) Fixed Mobile Number of Complaints per 1,000 customers (broad) Fixed Mobile		
<800> <900> <1000> <1010> <1110>	Service Quality Standards & Consumer Protection Functionality in Emergency Situations  Company Price Offerings (voice)  Company Price Offerings (broadband)  Operating Companies and Affiliates  Tribal Land Offerings (Y/N)?  Voice Services Rate Comparability  Terrestrial Backhaul (Y/N)?  Terms and Condition for Lifeline Customers	Rules Compliance  (check to indicate certification)  (attached descriptive document)  (check to indicate certification)  (attached descriptive document)  (complete attached worksheet)  (complete attached worksheet)  (if yes, complete attached worksheet)  (check to indicate certification)  (attach descriptive document)  (if not, check to indicate certification)  (complete attached worksheet)	
<2000> <2005>	Price Cap Carriers, Proceed to <u>Price Cap Additional</u> Including Rate-of-Return Carriers affiliated with Price Rate of Return Carriers, Proceed to <u>ROR Additional</u>	e Cap Local Exchange Carriers (check to indicate certification) (complete attached worksheet)	
<3005>		(complete attached worksheet)	

	rvice Quality Improvement Reporting llection Form		FCC Form 481.  OMB Control No. 3060-0986/OMB Control No. 3060-0819  July 2013
<010>	Study Area Code	109012	
<015>	Study Area Name	Cintex Wireless Inc	
<020>	Program Year	2014	
<030>	Contact Name - Person USAC should contact regarding this data	Robert Felgar	
<035>	Contact Telephone Number - Number of person identified in data I	ine <030> 3013634306	
<039>	Contact Email Address - Email Address of person identified in data	line <030> rfelgar@prepaidwirelessgroup.com	
<110>	Has your company received its ETC certification from the FCC?	(yes / no ) O	
<111>	If your answer to Line <110> is yes, do you have an existing §54.20 year plan" filed with the FCC?	(yes / no ) O	<del> </del>
	If your answer to Line <111> is yes, then you are required to file a preport, on line <112> delineating the status of your company's exis 54.202(a) "5 year plan" on file with the FCC, as it relates to your provice telephony service.	ting §	
<112>	Attach Five-Year Service Quality Improvement Plan or, in subsequer your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)( CETC which only receives frozen support, your progress report is or	1). If your company is a	
	required to address voice telephony service.		
		Name of Attache	d Document (.pdf)
	Please check these boxes below to confirm that the attached PDF, 112, contains a progress report on its five-year service quality impr plan pursuant to § 54.202(a). The information shall be submitted a center level or census block as appropriate.	on line rovement	
<113>	Maps detailing progress towards meeting plan targets		
<114>	Report how much universal service (USF) support was received		
<115>	How (USF) was used to improve service quality		
<116>	How (USF)was used to improve service coverage		
<117>	How (USF) was used to improve service capacity		
<118>	Provide an explanation of network improvement targets not met in the prior calendar year.		

Data Collection Form  OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013	(200) Service Outage Reporting (Voice) Data Collection Form		No. 3060-0819
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<010>	Study Area Code	109012					
<015>	Study Area Name	Cintex Wireless Inc					
<020>	Program Year	2014					
<030>	Contact Name - Person USAC should contact regarding this data	Robert Felgar					
<035>	Contact Telephone Number - Number of person identified in data line <030> 3013634306						
<039>	Contact Email Address - Email Address of person identified in data line <030> rfelgar@prepaidwirelessgroup.com						

<220>

>	<a></a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h></h>
	NORS Reference		Outage Start		Outage End	Number of		911 Facilities	Service Outage	Did This Outage Affect Multiple		
	Number	Date	Time	Date	Time	Customers Affected	Total Number of Customers	Affected (Yes / No)	Description (Check all that apply)	Study Areas (Yes / No)	Service Outage Resolution	Preventative Procedures
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0.000	ce Offerings including Voice Rate Data lection Form		FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	109012	
<015>	Study Area Name	Cintex Wireless Inc	
<020>	Program Year	2014	
<030>	Contact Name - Person USAC should contact regarding this data	Robert Felgar	
<035>	Contact Telephone Number - Number of person identified in data line <030>	3013634306	
<039>	Contact Email Address - Email Address of person identified in data line <030>	rfelgar@prepaidwirelessgroup.com	
<701>	Residential Local Service Charge Effective Date  1/1/2013 Single State wide Residential Local Service Charge		

State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fee
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<del>-</del> -		t						
		<del>                                     </del>		See att	ached worksheet			
		<del>                                     </del>			ported Workshoot			
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	<del>                                     </del>	1						
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<del></del>	<del> </del>	<del>                                     </del>		<del></del>				
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(710) Broadband Price Offerings  Pata Collection Form  OMB Control No. 3060-0986/OMB Control No. 3060-0819  July 2013
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<010>	Study Area Code	109012	
<015>	Study Area Name	Cintex Wireless Inc	
<020>	Program Year	2014	
<030>	Contact Name - Person USAC should contact regarding this data	Robert Felgar	
<035>	Contact Telephone Number - Number of person identified in data line <0	30> 3013634306	
<039>	Contact Email Address - Email Address of person identified in data line <	030> rfelgar@prepaidwirelessgroup.com	

<711>

<a1></a1>	<a2></a2>	<b1></b1>	 /b2>	<b>(c)</b>		<d2></d2>	<d3></d3>	
State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached (select)
			.4				<u></u>	
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	<u> </u>							
		Se	e attached	ļ				
		work	sheet	<del> </del>				
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	<del> </del>		<u> </u>					<del></del>

(800) Ope	erating Companies	e i i		FCC Form 481
	ection Form			OMB Control No. 3060-0986/OMB Control No. 3060-0819
				July 2013
		109012		
<010>	Study Area Code	·		
<015> <020>	Study Area Name	Cintex Wireless I	nc	
<030>	Program Year  Contact Name - Person USAC should contact regarding this data	2014 Robert Felgar		
<035>	Contact Telephone Number - Number of person identified in data line <0			
<039>	Contact Email Address - Email Address of person identified in data line <0		dwirelessgroup.com	
<810>	Reporting Carrier Cintex Wireless Inc		<u> </u>	
<811>	Holding Company	······································		
<812>	Operating Company	<del></del>		
<813>	çalı.		<a2></a2>	<a35.< td=""></a35.<>
	Affiliates		SAC	Doing Business As Company or Brand Designation
			ttached works	hoot
		000 8	ttached works	
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the arrangement of the second	oal Lands Reporting ection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819	
Data Coll	ector rotti	July 2013			
<010>	Study Area Code	109012			
<015>	Study Area Name	Cintex Wireless	s Inc		
<020>	Program Year	2014			
<030>	Contact Name - Person USAC should contact regarding this data	Robert Felgar			
<035>	Contact Telephone Number - Number of person identified in data line	e <030> 30136343	06		
<039>	Contact Email Address - Email Address of person identified in data line	e <030> rfelgar	@prepaidwirelessgroup.c	Om	
<910>	Tribal Land(s) on which ETC Serves				
		·		THE RESERVE OF THE PROPERTY OF	
<920>	Tribal Government Engagement Obligation				
		N	ame of Attached Docun	nent (.pdf)	
	If your company serves Tribal lands, please select (Yes,No, NA) for				
	each these boxes to confirm the status described on the attached				
	PDF, on line 920, demonstrates coordination with the Tribal				
	government pursuant to § 54.313(a)(9) includes:				
	8				
		Select (Yes,No,			
		(Yes,No,			
<921>	Needs assessment and deployment planning with a focus on Tribal	IVA)			
<921>	community anchor institutions;				
<922>	Feasibility and sustainability planning;				
<923>	Marketing services in a culturally sensitive manner;	<del></del>			
<924>					
	Compliance with Rights of way processes	<u> </u>			
<925>	Compliance with Land Use permitting requirements				
<926>	Compliance with Facilities Siting rules	<b> </b>			
<927>	Compliance with Environmental Review processes				
<928>	Compliance with Cultural Preservation review processes	<u></u>			
<929>	Compliance with Tribal Business and Licensing requirements.	<b> </b>			

	Terrestrial Backhaul Reporting ection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	109012	
<015>	Study Area Name	Cintex Wireless Inc	
<020>	Program Year	2014	
<030>	Contact Name - Person USAC should contact regarding this data	Robert Felgar	
<035>	Contact Telephone Number - Number of person identified in data line <030>	3013634306	
<039>	Contact Email Address - Email Address of person identified in data line <030>	rfelgar@prepaidwirelessgroup.co	m.
<1120>	Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G)		
<1130>	Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G)		

Lifeline	rms and Condition for Lifeline Customers ection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	109012	
<015>	Study Area Name	Cintex Wireless Inc	
<020>	Program Year	2014	
<030>	Contact Name - Person USAC should contact regarding this data	Robert Felgar	
<035>	Contact Telephone Number - Number of person identified in data	line <030> 3013634306	
<039>	Contact Email Address - Email Address of person identified in data	a line <030> rfelgar@prepaidwirelessgroup.com	
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans	Name of attached document (.pdf)  http://cintexwireless.com/terms-com/	ditions/
<1220>	Link to Public Website  "Please check these boxes below to confirm that the attached PDF on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:	HIIP	
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,		
<1222>	Details on the number of minutes provided as part of the plan,		
<1223>	Additional charges for toll calls, and rates for each such plan.	7	

(2000) P	rice Cap Carrier Additional Documentation		FCC Form 481
Data Collection Form			OMB Control No. 3060-0986/OMB Control No. 3060-0819
Including	g Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carri	ers	July 2013
<010>		109012	
<015>		Cintex Wireless Inc	
<020>		2014	
<030>		Robert Felgar	
<035>			
<039>	Contact Email Address - Email Address of person identified in data line <	030> rfelgar@prepaidwirelessgroup.com	
Contract Statement (Contract Contract C			
CHECK 1	the boxes below to note compliance as a recipient of Incremental Connect	America Phase I support, frozen High Cost support, High Cost support to of	fset access charge reductions, and Connect America Phase II
	support as set forth in 47 CFR § 54.313(b),(c	c),(d),(e) the information reported on this form and in the documents attacl	hed below is accurate.
	Incremental Connect America Phase I reporting		
<2010>			<b>1</b>
<2011>	3rd Year Certification (47 CFR § 54.313(b)(2))		
	Brico Con Couries Resolving France Support Cortification (47 CER & E4 21	7(5))	
<2012>	Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.31)  2013 Frozen Support Certification	.2(d))	<del></del>
<2012	· ·		
<2013	• • • • • • • • • • • • • • • • • • • •		<b>├</b> ─ <b>-</b>
			·
<2015	> 2016 and future Frozen Support Certification		
	Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))		
<2016	Certification Support Used to Build Broadband		
	Connect America Phase II Reporting (47 CFR § 54.313(e))		
	> 3rd year Broadband Service Certification		
<2017			[-]
<2017 <2018	> 5th year Broadband Service Certification		l
	·		
<2018	Interim Progress Certification	2021,	
<2018 <2019	Interim Progress Certification		
<2018 <2019	<ul> <li>Interim Progress Certification</li> <li>Please check the box to confirm that the attached PDF, on line 2 contains the required information pursuant to § 54.313 (e)(3)(ii).</li> </ul>	, as a recipient	
<2018 <2019	Interim Progress Certification Please check the box to confirm that the attached PDF, on line 2 contains the required information pursuant to § 54.313 (e)(3)(ii) of CAF Phase II support shall provide the number, names, and ac	, as a recipient Idresses of	
<2018 <2019	<ul> <li>Interim Progress Certification</li> <li>Please check the box to confirm that the attached PDF, on line 2 contains the required information pursuant to § 54.313 (e)(3)(ii).</li> </ul>	, as a recipient Idresses of	

Annual Control No. 3000 SEES	3000) Ra	te Of Return Carrier Additional Documentation		FCC Form 481
College	ata Colle	ection Form.		
College		100012		
4020b Contact Februs Person USAC (bloods contact regarding this data. No. 1995)         About The Person USAC (bloods contact regarding this data. No. 1995)         80 bett Februs The Section of Section (Section of Section Section of Section S		Study Area Code		
Contact Name - Person USAS: Double context operating this data is expected.  Contact Carel Address: Frail Address of person identified in data line 4000 in 10 13 (0.43) 45 (0.45) 45 (0.4		**************************************	ireless Inc	
Collect Tellsphone Number - Number of person identified in data line c0190- CRECK Ir black traumal Address - Email Address of person identified in data line c0190- CRECK Ir black traumal Address - Email Address of person identified in data line c0190- CRECK Ir black traumal Address - Email Address of person identified in data line c0190- CRECK Ir black traumal Address - Email Address on its five year service quality plan (pursuant to 4 CR § 54.331(R). If urther certify that the information of the person of the pers			hant Belland	
CREAT Ernal Address - Ernal Address of person identified in data line c0300				
Progress Report on 5 Year Plan  Progress Report on 5 Year Plan    Progress Report on 5 Year Plan				
Progress Report on 5 Year Plan  Progress Report on 5 Year Plan    Progress Report on 5 Year Plan	nione management			
Sample   Milestone Cartification (47 CFR § 54.313(f)(1)(i))   Name of Attached Document Listing Required Information   Please check this bot to confirm that the attached PDF, on line 3012, recipient of CAF Phase I support shall provide the number, names, and addresses of community and service in the praceding calendar year.		ne boxes below to note compliance on its five year service quality plan (pursu	ant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring	compliance with the financial reporting requirements set forth in 47
Please check this bus to confirm that the attached PDF, on line 3012, contains the required information pursuant to § 54.313 (f)(1)(ii), as a difference of Community anchor institutions to which began providing access to broadband service in the preceding claded we have a difference of Community anchor institutions (af CER § 54.313)(f)(1)(ii) and a difference of Community anchor institutions (af CER § 54.313)(f)(1)(iii) and the community anchor institutions (af CER § 54.313)(f)(2)(iii) and five the comman of the co		Progress Report on 5 Year Plan		
Section of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.    Community Anchor Institutions (47 CRF \$ 54.313(f)(10))	(3010)		Name of Attached Document Listing Required Information	
Sayour company a Privately Held NOR Carrer (47 CFR \$4.3.13(f)(2))   Yes, does your company file the RUS annual report   Please check these boxes to confirm that the attached PDF, on line 3017,   contains the required information pursuant to \$5.4.3.13(f)(2) compliance   required:   Selectionic copy of their annual RUS reports (Operating Report for   Telecommunications Borrowers    The response is yes on line 3014, stach your company's RUS annual   RUS annual RUS reports (Operating Report for Telecommunications in a size of the special systems on line 3014, it your company's RUS annual   RUS annual RUS reports (Operating Report for Telecommunications in a format comparable to RUS Operating Report for Telecommunications     Sether a copy of their audited financial statement, or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications     Sether a copy of their sudded financial statement of cash Flows     Sether a copy of their insued by the independent certified public accountant that the company's financial audit.     If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to 5 54.313(f)(2), contains     Sether a copy of their financial statement which has been subject to review by an independent certified public accountant that provide the company's financial audit.     If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to 5 54.313(f)(2), contains     Copy of their financial statement which has been subject to review by an independent certified public accountant that company in the propriation of the propriation subjected to a review by an independent certified public accountant that contains and the propriation subjected to a review by an independent certified public accountant that contains and statement and Statement of Cash Flows	(3011)	recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing		
Telecommunications Borrowers)    Solidar   POF of Balance Sheet, Income Statement and Statement of Cash Flows	(3013)	Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2)) If yes, does your company file the RUS annual report Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance	Name of Attached Document Listing Required Information	
If the response is yes on line 3014, attach your company's RUS annual report and all required documentation  If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to 5 54.313(f)(2), contains:  Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications  PDF of Balance Sheet, Income Statement and Statement of Cash Flows  Management letter issued by the independent certified public accountant that performed the company's financial audit.  If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:  Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers,  Underlying information subjected to a review by an independent certified public accountant (3024)  Underlying information subjected to a review by an independent certification.  PDF of Balance Sheet, Income Statement and Statement of Cash Flows	(3015)			
report and all required documentation  (3018) If the response is no on line 3014, Is your company audited?  If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains  Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications  PDF of Balance Sheet, Income Statement and Statement of Cash Flows  Management letter issued by the independent certified public accountant that performed the company's financial audit.  If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:  Copy of their financial statement which has been subject to review by an independent certified public accountant, or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers,  Underlying information subjected to a review by an independent certified public accountant  (3024) Underlying information subjected to an officer certification.  PDF of Balance Sheet, Income Statement and Statement of Cash Flows	(3016)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows		<u> </u>
If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:  Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications  PDF of Balance Sheet, Income Statement and Statement of Cash Flows  Management letter issued by the independent certified public accountant that performed the company's financial audit.  If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:  Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications  Borrowers,  Moderlying information subjected to a review by an independent certified public accountant  Junderlying information subjected to an officer certification.  PDF of Balance Sheet, Income Statement and Statement of Cash Flows		report and all required documentation	Name of Attached Document Listing Required Information	(Voc/No)
in a format comparable to RUS Operating Report for Telecommunications PDF of Balance Sheet, Income Statement and Statement of Cash Flows  (3021) Management letter issued by the independent certified public accountant that performed the company's financial audit.  If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains: Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers, Underlying information subjected to a review by an independent certified public accountant  (3024) Underlying information subjected to an officer certification.	(3010)	If the response is yes on line 3018, please check the boxes below to		(to)(v)
(3021) Management letter issued by the independent certified public accountant that performed the company's financial audit.  If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:  Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers,  Underlying information subjected to a review by an independent certified public accountant  Underlying information subjected to an officer certification.		in a format comparable to RUS Operating Report for Telecommunications		
that performed the company's financial audit.  If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:  Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications  Borrowers,  Underlying information subjected to a review by an independent certified public accountant  Underlying information subjected to an officer certification.	(3020)	To or balance street, moonie statement and statement of Cash Flows		
to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains: Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers, Underlying information subjected to a review by an independent certified public accountant Underlying information subjected to an officer certification.	(3021)			
independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers, Underlying information subjected to a review by an independent certified public accountant Underlying information subjected to an officer certification.    3023  PDF of Balance Sheet, Income Statement and Statement of Cash Flows		to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:		
public accountant (3024) Underlying information subjected to an officer certification. (3025) PDF of Balance Sheet, Income Statement and Statement of Cash Flows	(3022)	independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications		
(3024) Underlying information subjected to an officer certification.  (3025) PDF of Balance Sheet, Income Statement and Statement of Cash Flows	(3023)	Underlying information subjected to a review by an independent certified		
	(3024)			
(3026) Attach the worksheet listing required information Name of Attached Document Listing Required Information	(3025)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows		
	(3026)	Attach the worksheet listing required information	Name of Attached Document Listing Required Information	

<010>	Study Area Code	109012		
<015>	Study Area Name	Cintex Wireless Inc		
<020>	Program Year	2014		
<030>	Contact Name - Pers	Contact Name - Person USAC should contact regarding this data Robert Felgar		
<035>	Contact Telephone N	Contact Telephone Number - Number of person identified in data line <030> 3013634306		
<039>	Contact Email Address - Email Address of person identified in data line <030> rfelgar@prepaidwirelessgroup.com			

### TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

#### Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients

l certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.

Name of Reporting Carrier: Cintex Wireless Inc

Signature of Authorized Officer: CERTIFIED ONLINE Date

Printed name of Authorized Officer: Brandt Mensh

Title or position of Authorized Officer: President

Telephone number of Authorized Officer: 3013634306

Study Area Code of Reporting Carrier: 109012 Filing Due Date for this form: 10/15/2013

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

	ion - Agent / Carrier ection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	109012
<015>	Study Area Name	Cintex Wireless Inc
<020>	Program Year	2014
<030>	Contact Name - Person l	JSAC should contact regarding this data Robert Felgar

## TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

<039> Contact Email Address - Email Address of person identified in data line <030> rfelgar@prepaidwirelessgroup.com

Contact Telephone Number - Number of person identified in data line <030> 3013634306

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier					
certify that (Name of Agent) is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.					
Name of Authorized Agent:					
Name of Reporting Carrier:					
Signature of Authorized Officer:			Date:		
Printed name of Authorized Officer:				-	
Title or position of Authorized Officer:					
Telephone number of Authorized Officer:					
Study Area Code of Reporting Carrier:	Filing Due Date for this form:				
Persons willfully making false statements on this form can be	punished by fine or forfeiture under the Communicati under Title 18 of the United States Code, 18 U.S.C. § 1		. §§ 502, 503(b), or fine or imprison	ment	

## TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier					
, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provid					
the data reported herein based on data provided by the repo	orting carrier; and, to the best of my knowledge,	the information reported herein is accurate.			
Name of Reporting Carrier:					
Name of Authorized Agent or Employee of Agent:					
Signature of Authorized Agent or Employee of Agent:		Date:			
Printed name of Authorized Agent or Employee of Agent:					
Title or position of Authorized Agent or Employee of Agent					
Telephone number of Authorized Agent or Employee of Agent	t:				
Study Area Code of Reporting Carrier:	Filing Due Date for this form:				